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Application Number	09/178,329
Filing Date	October 23, 1998
First Named Inventor	Michael R. Nowak
Art Unit	1773
Examiner Name	M. Jackson
Attorney Docket Number	E4919-00003

**I hereby revoke all previous powers of attorney given in the above-identified application.**

☐ A Power of Attorney is submitted herewith.

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)*

**SIGNATURE of Applicant or Assignee of Record**

Signature

Name

Michael R. Nowak

Date

11/13/06

Telephone

920-996-1900

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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